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BY

DATE

DESCRIPTION

REV.

[CONSULTANT LOGO]

NORFOLK DEPARTMENT OF UTILITIES
[PROJECT NAME]
[TASK]

DRAWING INDEX I

DESIGNED BY: _____
DRAWN BY: _____
CHECKED BY: _____
APPROVED BY: _____
DATE: _____

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[STAMP SEAL]

ER No: | PCTS No:
FILE NAME:
DATE: | SCALE:
SHEET G-02